

Application for Mechanical Contractor License Examination

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Michigan Department of Energy, Labor & Economic Growth

Bureau of Construction Codes / Mechanical Division

P.O. Box 30255, Lansing, MI 48909

517-241-9325

Application Fee: \$100.00 (nonrefundable)

www.michigan.gov/bcc

Authority: 1984 PA 192
Completion: Mandatory
Penalty: License will not be issued

DELEG is an equal opportunity employer/program. Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.

Instructions:

- Complete and sign application. Type or print in ink.
- **Completed and signed application and the application fee must be received in the Bureau office not less than 20 working days before next scheduled exam.**
- Incomplete applications or applications received without the application fee will not be approved for examination.
- Enclose a check made payable to the **State of Michigan**.
- Mail completed application and payment to the address listed above.

Applicant Information

		CONTRACTOR LICENSE NUMBER - REQUIRED WHEN UPGRADING ONLY	
		71 -	<input type="checkbox"/> Upgrade
NAME (Last, First, Middle) No Initials		DATE OF BIRTH	LAST 4 DIGITS OF SOCIAL SECURITY NUMBER*
			XXX-XX-
ADDRESS			TELEPHONE NUMBER (Include Area Code)
CITY	COUNTY	STATE	ZIP CODE

Work Classifications (Check work classifications for which you are desiring to test for)

- | | |
|---|---|
| <p><input type="checkbox"/> 1. Hydronic heating and cooling and process piping (includes the installation of residential boilers).
(Means the application of equipment and systems which provide air conditioning by the controlled forced circulation of fluids or vapors in pipes.)</p> <p><input type="checkbox"/> 2. HVAC equipment (includes ductwork, gas piping and venting).
(Means the application of equipment and systems to provide air conditioning for occupants of buildings and structures. HVAC does not include the installation of portable self-contained refrigeration equipment and window type air conditioners of not more than 1 1/2 horsepower.)</p> <p><input type="checkbox"/> 3. Ductwork.
(Means the air distribution arrangement for supply, return and exhaust in air conditioning systems and in non-air conditioning systems, the materials and methods of which are specified in the Michigan Mechanical Code. Ductwork includes flues, vents and chimneys.)</p> <p><input type="checkbox"/> 4. Refrigeration.
(Means the use of equipment and systems including refrigeration piping, employing the refrigeration cycle to generate low temperatures for other than air condition equipment and systems. Refrigeration includes such equipment and systems as supermarket refrigeration, industrial refrigeration, the preservation of biological materials and food storage facilities. Refrigeration does not include the installation of portable self-contained units such as refrigerators, dehumidifiers and other similar equipment of not more than 1.5 horsepower or other equipment exempted from the Michigan Mechanical Code.)</p> <p><input type="checkbox"/> 5. Limited heating service.
(Means the servicing of gas-designed sectional boilers having inputs of not more than 1 million Btu's, utilizing a combustion safeguard designed to shut off the main gas supply 10 or less seconds after pilot flame failure, and all other gas-fired or solid fuel equipment and systems limited to input ratings of less than 400,000 Btu's per unit; or oil-fired equipment and systems designed for the use of number 1 or number 2 fuel oil, having a maximum firing rate of less than five gallons per hours per unit; or electrical furnaces and electric boilers using the same kilowatts that are equivalent to the fossil fuel British thermal units generated.)</p> | <p><input type="checkbox"/> 6. Unlimited heating service.
(Means the servicing of heating equipment and systems without restrictions concerning thermal capacity or grade of fuel oil or type of fuel.)</p> <p><input type="checkbox"/> 7. Limited refrigeration and air conditioning service.
(Means the servicing of refrigeration equipment and systems and air conditioning equipment and systems employing the refrigeration cycle unlimited capacity utilizing group one refrigerants as listed in the Michigan Mechanical Code.)</p> <p><input type="checkbox"/> 8. Unlimited refrigeration and air conditioning service.
(Means the servicing of refrigeration equipment and systems and air conditioning equipment and systems employing the refrigeration cycle unlimited as to thermal capacity or type of refrigerant.)</p> <p><input type="checkbox"/> 9. Fire Suppression.
(Means the integrated combination of a fire alarm system and fire suppression equipment which as a result of predetermined temperature, rate of temperature rise, products of combustion, flame, or human intervention will discharge a fire extinguishing substance over a fire area.)</p> <p><input type="checkbox"/> 10. Specialty License.
(Means a license to perform work within limits established by the board in one of the work classifications set forth below, for the installation and servicing of:)</p> <p><input type="checkbox"/> a. Solar.
<input type="checkbox"/> b. Solid fuel.
<input type="checkbox"/> c. LP tank and pipe.
<input type="checkbox"/> d. Underground tank and pipe.
<input type="checkbox"/> e. Gas piping.
<input type="checkbox"/> f. Gas piping and venting.</p> |
|---|---|

*This information is confidential. Disclosure of confidential information is protected by the Federal Privacy Act.

Education

Have you attended a recognized community college or university and obtained a minimum 2 year degree? ☐ Yes ☐ No

If yes and you are requesting credit, attach a copy of your official transcript and your original diploma.

Examination Location

Examinations are given at the sites listed below. Refer to the enclosed "Mechanical Contractor Examination Schedule" for examination dates. Please check below the site you wish to be examined at and indicate a preference of examination date. If approved for examination, an admission card will be mailed to you approximately 10 days prior to the examination date. If the examination you have selected is full, you will be scheduled for the next available examination at your preferred site.

Preferred Site

Preferred Date

☐ Lansing Area

☐ Escanaba

☐ No Preference - Next Available Examination

If you have a learning disability, a psychological disability, or other hidden disability that requires an accommodation in testing, submit written documentation from an appropriate professional (education professional, doctor, psychologist, psychiatrist) to certify that your disabling condition requires the requested test accommodation. Forms are available from this office.

Background Information

Have you been convicted a felony or misdemeanor? ☐ Yes ☐ No

If yes, complete the Conviction History section below. Failure to accurately respond to this question will result in you forfeiting any rights of consideration for examination and issuance of a mechanical contractor's license in the state of Michigan.

Conviction History

In accordance with the Former Offenders Act, 1974 PA 381, this is to provide you with an opportunity to explain your affirmative response to the question above which asked if you had been convicted of a felony or misdemeanor.

If you are unsure of exact details, respond to the best of your knowledge. The information requested on this form is required under 1984 PA 192 and will be used to process your application. Attach additional sheet(s) if necessary.

YOUR NAME WHEN CONVICTED

INDICATE CONVICTION(S) FOR WHICH YOU WERE CHARGED

DATE(S) OF CONVICTION(S) AND SENTENCE(S)

NAME AND ADDRESS OF SENTENCING COURT(S)

CHECK YES OR NO TO THE FOLLOWING

1. Are you a current inmate? ☐ Yes ☐ No

2. Are you currently on probation / parole? ☐ Yes ☐ No

3. If yes, provide the name, address and telephone number of the correctional facility, probation officer or parole officer.

RELEASE DATE FROM CUSTODY, PROBATION OR PAROLE

REHABILITATION PROGRAMS ENROLLED IN OR COMPLETED

Conviction History Certification and Signature (To be signed only if Conviction History section above is completed)

I hereby certify the statements and facts provided are true and accurate to the best of my knowledge. By signing this form, I give my permission to allow the Bureau of Construction Codes to contact appropriate agencies regarding my record of conviction(s).

SIGNATURE

DATE

Experience Record

It is necessary to show a minimum of 3 years experience in **EACH** of the work classifications you are desiring to test for. List your present employer first. Describe the type of work performed in **DETAIL** to enable the reviewer to correctly evaluate your qualifications. Describe the work classifications you have had experience in and the length of time you performed the work. Have each contractor of record certify your dates of employment and have their signatures notarized. Attach extra sheets if necessary. **All attached sheets must be signed and notarized.**

EMPLOYER NAME			DATES EMPLOYED (Month / Day / Year)	
			FROM:	TO:
ADDRESS			TYPE OF WORK PERFORMED	
			<input type="checkbox"/> Residential <input type="checkbox"/> Full-Time	
CITY			<input type="checkbox"/> Commercial <input type="checkbox"/> Part-Time	
STATE			<input type="checkbox"/> Industrial Hours per week _____	
ZIP CODE				
DESCRIPTION OF WORK PERFORMED (Include experience in EACH work classification you are desiring to test for)				

Employer Complete The Following

I hereby certify the applicant was in my employ during the period stated and the applicant's description of experience on this application is accurate.			Subscribed and sworn before me, this _____ day of _____, 20____. a Notary Public in and for _____ County, Michigan. Signature of Notary Public _____ My Commission expires: _____, 20____.
SIGNATURE OF CONTRACTOR OF RECORD		DATE	
NAME OF CONTRACTOR OF RECORD (No Initials)			
LICENSE NUMBER		TELEPHONE NUMBER (Include Area Code)	

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LICENSE NUMBER	TELEPHONE NUMBER (Include Area Code)	

Certification and Signature (MUST BE SIGNED BY ALL APPLICANTS)

I certify all information in this application is true and complete and I agree and understand any falsification of material facts will result in my forfeiting any rights of consideration for examination and issuance of a mechanical contractor's license in the state of Michigan.	
SIGNATURE OF APPLICANT	DATE